Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY	
FOR		NUMBE	R FILED	NUMBER	EXTRA	RATE	FEE		RATE	FEE
BASIC FEE							395.00	OR		790.00
TOTAL CLAIMS // minus			20 = *		x\$11=		OR	x\$22=		
INDEPENDENT CLAIMS / minus 3 =			s 3 = × 7		x41=		OR	x82=	574	
MULTIPLE DEPENDENT CLAIM PRESENT								OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL								OR	TOTAL	1364
CLAIMS AS AMENDED - PART II							•	OTHER THAN		
		(Column 1)		(Column 2)	(Column 3)	SMAL	L ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
ME	Independent	*	Minus	***	=	x41=		OR	x82=	
▼	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +1							OR	+270=	
	(Column 1) (Column 2) (Column 3)						TOTAL OR ADDIT. FEE OR ADDIT. FEE			
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
AMEN	Independent	*	Minus	***	=	x41=		OR	x82=	
▼	FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135=		OR	+270=	
(Column 1) (Column 2) (Column 3) TOTAL ADDIT. FEE								OR	TOTAL ADDIT. FEE	
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
MEN	Independent	*	Minus	***	=	x41=		OR	x82=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	+270=	
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								TOTAL ADDIT. FEE	
"	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.									

PTO/SB/06 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR **SMALL ENTITY** (Column 1) (Column 2) FOR NUMBER EXTRA NUMBER FILED RATE FEE RATE FEE **BASIC FEE** \$ OR (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = OR INDEPENDENT CLAIMS minus 3 = OR = (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR **TOTAL** OR TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 3) (Column 1) (Column 2) **CLAIMS** HIGHEST ADDI-REMAINING NUMBER **PRESENT RATE** TIONAL RATE TIO **AMENDMENT AFTER** PREVIOUSLY **EXTRA FEE** AMENDMENT PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL **TOTAL** OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING PRESENT NUMBER RATE TIONAL TIONAL **RATE AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT PAID FOR OR Total ** Minus = (37 CFR 1.16(c)) OR Independent Minus OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

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